## QMB/LMB/ELMB/Subsidy Comparison Chart KEESM 2671, 2672, 2675

| QMB  | LMB   | ELMB   | SUBSIDY  |
|--|---|--|--|
| -Pays Medicare A & B premium -Pays Medicare deductibles and copayments -Automatically deemed eligible for Medicare Part D Subsidy  | -Pays Medicare Part B<br>premium<br>-Automatically deemed<br>eligible for Medicare Part<br>D Subsidy                                | Same as LMB  | -Pays Part D plan's basic premium, deductible, and partial co-pays -QMB, LMB, ELMB & Medicaid consumers deemed automatically eligible -Determined eligible consumers are eligible for Subsidy based on a level established by countable income & resources. Documented on the SUDD screen. |
| -Meet KEESM 2100 general eligibility -\$6,600 single & \$9,910 couple resource limit   | Same as QMB   | Same as QMB  | -Meet KEESM 2675 eligibility<br>-\$11,010 single & \$22,010 couple   |
| Must have Medicare Part A coverage   | Same as QMB   | Same as QMB  | Must have Medicare A &/or Medicare B   |
| Countable income cannot exceed 100% of federal poverty level   | Countable income between 100% & 120% of federal poverty level   | Countable income between 120% & 135% of federal poverty level  | Countable income cannot exceed 150% of federal poverty level   |
| Subject to normal Medicaid state & federal match   | Same as QMB   | 100% federally funded  | Federally funded (CMS reimburses plans)  |
| Initial eligibility cannot be provided prior to the month following the month EES processes  | Can be provided for the month of application as well as the prior eligibility period  | Same as LMB  | -Deemed eligibility begins month of QMB, LMB, and full Medicaid eligibility -Determined eligibility can be provided for month of application   |
| Eligibility can be established for persons who are or are not trying to establish full Medicaid coverage   | Same as QMB   | Eligibility can be established for person who want LMB coverage only and are not trying to qualify for full Medicaid                                 | Eligibility can be established for persons who are or are not trying to establish full Medicaid coverage   |
| -Use a QMB indicator field (Y or N) on applicable income determination (MSID or SIAU) screen -Can use QM, QS, QO, or WQ special medical indicator on the PICK screen to annually disregard SSA Cola form January 1 of each year until the new federal poverty level standards are known. | -Use one of the following special medical indicators on PICK screen:  LM (LMB + Full MCD) LS (LMB + SD) WL (LMB + WH) LO (LMB only) | -Use LL special medical indicator on the PICK screen -This code should be retained on PICK as long as the person remains eligible under this program | -No special coding for Deemed eligibles -Determined eligibles use MD coding on PICK screen for Subsidy only cases -Do not use MD on PICK for Medically Needy case with Subsidy -Go to SUDD screen to authorize & determine level of Subsidy  |
| QO program subtype is use don SEPA for QMB only coverage   | LO program subtype is used on SEPA for LMB only coverage  | LO program subtype<br>is used on SEPA for<br>LMB only coverage   | No program subtype on SEPA for Subsidy only  |
| 1 month base period if QMB only or 6 month base if trying for SD   | 1 month base period if<br>LMB only or 6 month<br>base if trying for SD  | Must use 1 month base  | <ul><li>-1 month base period for Subsidy only</li><li>-6 month base period for MN with Subsidy</li></ul>   |

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